

# PS 321

## PERFORMING ARTS COMPANY



Teacher Karen Curlee and her staff will host a 15 week program,  
**Performing Arts Company** for 4th and 5th grade students.

During the **Performing Arts Company After School Residency**, students will participate in after-school programming using Broadway musicals. Shows will be chosen based on what the Company agrees on at the first class and numbers from these shows will use all the participating students. Students will help create scenes that lead into each song and will also help with the choreography and design.

A final performance for families will occur on Monday May 11<sup>th</sup>, 2020.

Those who apply must be committed and enthusiastic to ensure a tight knit company! Regular attendance is mandatory.

**P.A.C. will be held on Mondays from 2:50-4:20 pm.**  
**Class begins January 13<sup>th</sup> and ends May 11<sup>th</sup>, the cost is \$325 for the  
15 week cycle.**



SPONSORED BY THE P.S. 321 P.T.A.

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# P.A.C. 4<sup>th</sup>/5<sup>th</sup> Grades

Please drop your registration form, with payment, to the 'Kid's Club' box in the Main Office. Make your check payable to P.S. 321 P.T.A, & please indicate child's name on check.

**Class size is limited. If registration exceeds spaces, students will be chosen by lottery.**

If the class is full and your child does not get enrolled, your check will be ripped up.

**Returning 5<sup>th</sup> graders will be given priority.**

**Without exception, forms submitted after deadline or without payment will not be considered.**

**REGISTRATION IS DUE BY FRIDAY, JANUARY 3<sup>rd</sup> @ 4:30PM.**

**STUDENTS WHO ARE ENROLLED WILL RECEIVE A DETAILED E-MAIL CONFIRMATION**

Questions? Email: [cgilbert@ps321.info](mailto:cgilbert@ps321.info)

Child's Name \_\_\_\_\_  Boy  Girl

Daytime Teacher's Name \_\_\_\_\_ Classroom # \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Telephone Number #1 \_\_\_\_\_ #2 \_\_\_\_\_

Email (PLEASE PRINT CLEARLY) \_\_\_\_\_

Allergies/Important Info \_\_\_\_\_

Emergency Contact Name & Tel. #'s \_\_\_\_\_

Name and Phone of Person(s) authorized to pick up your child \_\_\_\_\_

## SCHOLARSHIP

*Only eligible if you have seen one of our Guidance Counselors Ben Halioua or Jon Alvarez for approval – **their signature is required***

I need partial Scholarship Assistance I can pay \$ \_\_\_\_\_ Guidance Initials: \_\_\_\_\_

My child has permission to **walk home alone.** (4<sup>th</sup> & 5<sup>th</sup> grade only)

I opt out of having my child's name (first & last initial only) to be posted on the enrollment list on the after school portion of the PS 321 website ([www.ps321.org](http://www.ps321.org))

In case of an emergency, and if time permits, P.S. 321 staff will make every effort to contact you before deciding what action to take to insure your child's health and safety.

Parent(s) /Guardian(s) Signature(s) \_\_\_\_\_

**DEADLINE: FRIDAY, JANUARY 3<sup>rd</sup> @ 4:30 PM**